

A study to assess the knowledge and practice regarding management of minor disorders of pregnancy among primigravida mothers at R.L Jalappa hospital, Kolar with a view to develop an information booklet.

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Abstract

Background & Objective: Minor maternal health problems that interfere with daily life place a significant burden on the pregnancy period. As a result, the current study was conducted with the goal of assessing primigravida mothers' knowledge and practise regarding the management of minor pregnancy disorders at R. L. Jalappa Hospital in Kolar.

Materials and Methods: An exploratory approach combined with a descriptive research design was used for the study. 60 primigravida mothers who agreed to participate in the study were included using the purposive sampling method. After that, information was gathered using a structured knowledge questionnaire and practise was done using a checklist. Cross tabulation was used to analyse the data that had been gathered.

Results: According to the study's goal, the knowledge of primigravida mothers regarding the treatment of minor obstetrical disorders was evaluated. The results showed that 88.3% (53) of the study participants had insufficient knowledge, and 11.7% (seven) had moderate knowledge. The assessment of the relationship between knowledge and practise in the management of primigravida mothers revealed that there is no meaningful relationship between knowledge and practise in the management of minor obstetric disorders..

Conclusion: This study concludes that there is an urgent need to educate all primigravida mothers regarding management of minor disorders of pregnancy.

Key Words: Primigravida mothers, Knowledge, Practice, Minor disorders of pregnancy.

Introduction

A wonderful time in most women's lives is during pregnancy, which lasts for about 10 lunar months, 9 calendar months, 40 weeks (or) 280 days.¹

The most significant event in a woman's life is pregnancy, which necessitates special attention from the moment of conception through the postnatal period. Pregnancy is a uniquely personal experience for women, and each pregnancy will be sufficiently different from the previous one. 2A woman who is expecting for the first time has certain attitudes, beliefs, and knowledge about childbearing entering pregnancy. Unfounded and unhealthy theories include the notion that eating papaya will result in an abortion and that drinking a lot of water and eating a lot of food will result in an overgrown baby and difficult deliveries. For the benefit of both the mother and the child, these misconceptions must be dispelled through accurate information.³

Common minor disorders include constipation brought on by the pressure of the gravid uterus on the pelvic colon, nausea and vomiting brought on by an increase in human chorionic gonadotropin, back pain caused by the relaxation of pelvic joints and poor posture, and dyspnea from the gravid uterus filling the majority of the abdominal cavity. Therefore, a healthy diet and regular exercise can usually treat these minor disorders. 4A lot of pregnant women experience minor illnesses. Those minor disorders need to be properly treated because they could worsen and pose a life-threatening threat. Hormonal changes and adjustments to every system of the body can cause minor disorders. Giving empathetic and sensible advice about ways to treat these disorders helps promote overall health and well-being. The mother needs knowledge to deal with the experience of pregnancy. Although these symptoms are categorised as minor, to the women who are experiencing them, they are not minor. Each of these symptoms has the potential to develop into a more serious issue that requires the mother's care throughout her pregnancy. The midwife should never forget to assess her knowledge and skills in managing minor pregnancy disorders⁷ after giving anticipatory advice.

Objectives:

1. To assess the knowledge of antenatal mothers regarding the management of minor disorders of pregnancy.
2. To determine the association between the knowledge and practice regarding management of minor disorders of pregnancy.
3. To develop an information booklet regarding management of minor disorders of pregnancy and its management.

Settings and Design:

Study was conducted on 26/08/2019 to 07/09/2019 at R. L Jalappa Hospital, Tamaka, Kolar.

In this study, an exploratory approach and a descriptive design will be amended in order to evaluate the knowledge and practise of primigravida mothers regarding the management of minor obstetric disorders.

Methods and Material:

A descriptive research design with an exploratory approach was used for the study. 60 primigravida mothers who agreed to participate in the study were included using the purposive sampling method. Then information was gathered using a practise checklist and a structured knowledge questionnaire. Cross tabulation was used to analyse the data that had been gathered.

Statistical analysis used:

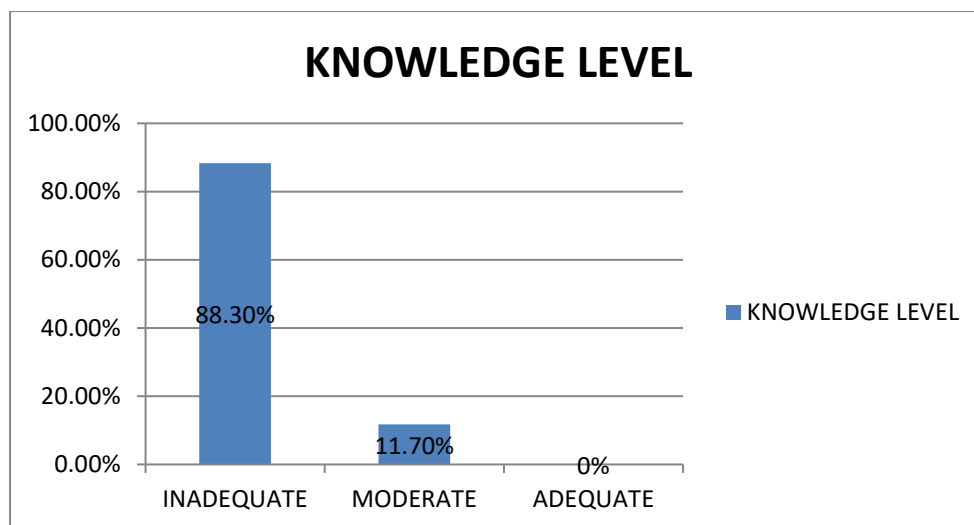
Analysis was done by using the descriptive and inferential statistics

Table: 1

Percentage distribution of study participants according to overall knowledge

Knowledge score	Frequency	Percentage (%)
Inadequate (Below 50%)	53	88.3
Moderate (50-74%)	7	11.7
Adequate (75%)	0	0
Total=	60	100

Fig: 1



Above bar diagram shows the knowledge scores, majority 88.3% of study participants have inadequate knowledge and 11.7% have moderate knowledge.

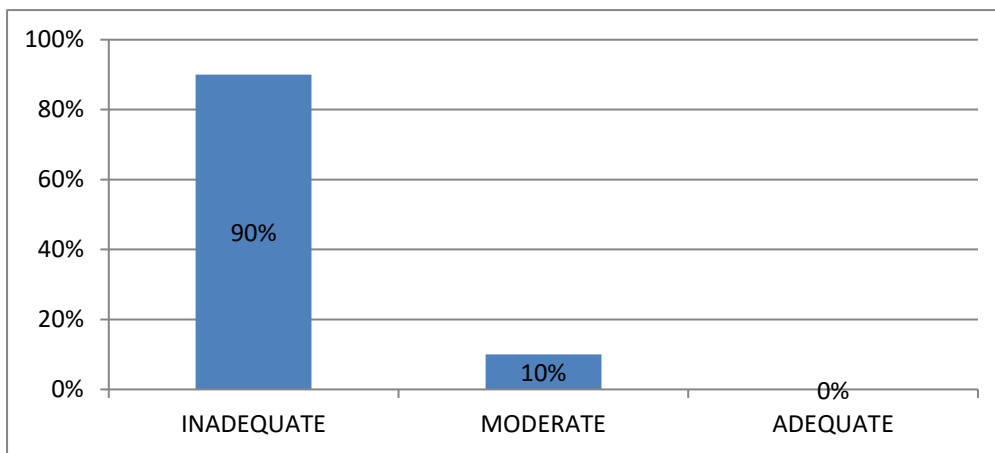
Table: 2

Percentage distribution of study participants according to practice

Practice score	Frequency	Percentage (%)
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Inadequate (Below 50%)	54	90
Moderate (50-74%)	6	10
Adequate (75%)	0	0
Total=	60	100

Fig: 2



Above bar diagram shows the practice scores, 90% of study participants have inadequate practice and 10% have moderate practice.

Association between overall knowledge scores and practice scores

Table: 3

Cross tabulation based on knowledge scores and practice scores

		PRACTICE SCORES		
		Inadequate	Moderate	Adequate
KNOWLEDGE SCORES	Inadequate	107	06	0
	Moderate	7	0	0
	Adequate	0	0	0

Step 1: State the hypotheses and select an alpha level

H₀: There is no relationship between knowledge and practice

H₁: There is a relationship between knowledge and practice

set $p = 0.05$

Step 2:

- Compute your degrees of freedom

$$df = (\#Columns - 1) * (\#Rows - 1)$$

- Go to Chi-square statistic table and find the critical value

Step 3: Collect data and compute test statistic

Table: 4

Distribution of expected frequencies

Compute the expected frequencies (in bold color)

		PRACTICE SCORES			Total
		Inadequate	Moderate	Adequate	
KNOWLEDGE SCORES	Inadequate	107 107.35	06 5.65	0 0	113
	Moderate	7 6.65	0 0	0 0	7
	Adequate	0 0	0 0	0 0	0
Total		114	6	0	

Table: 5

Association between knowledge and practice using Chi-squared statistic

Compute the Chi-squared statistic

Cell	O	E	(O-E)	(O-E) ²	(O-E) ² /E
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Inadequate Knowledge Inadequate Practice	107	107.35	-0.35	0.1225	1.14
Inadequate Knowledge Moderate Practice	6	5.65	0.35	0.1225	0.02
Inadequate Knowledge Adequate Practice	0	0	0	0	0
Moderate Knowledge Inadequate Practice	7	6.65	0.35	0.1225	0.018
Moderate Knowledge Moderate Practice	0	0	0	0	0
Moderate Knowledge Adequate Practice	0	0	0	0	0
Adequate Knowledge Inadequate Practice	0	0	0	0	0
Adequate Knowledge Moderate Practice	0	0	0	0	0
Adequate Knowledge Adequate Practice	0	0	0	0	0

$$X^2 = 1.14 + 0.02 + 0 + 0.018 + 0 + 0 + 0 + 0 + 0 = 1.178$$

Association between overall knowledge scores and practice scores

The obtained x2 value (1.178) is lower than the value in the table (3.84). As a result, there is no correlation between knowledge and practise regarding the treatment of minor obstetric disorders.

Results:

According to the study's goal, the knowledge of primigravida mothers regarding the treatment of minor obstetrical disorders was evaluated. The results showed that 88.3% (53) of the study participants had insufficient knowledge, and 11.7% (seven) had moderate knowledge. The assessment of the relationship between knowledge and practise in relation to the management of primigravida mothers' revealed that there is no significant relationship between knowledge and practise in relation to the management of minor obstetric disorders.

Discussion:

The purpose of the current study was to evaluate primigravida mothers' knowledge and practises regarding the treatment of minor obstetric disorders. Purposive sampling was used to select the samples, and a descriptive design was used as well. Utilizing a structured knowledge and practise checklist, data was gathered. two sections make up the tool; Statistical information in Section A. Section-B: Structured knowledge test on the treatment of minor obstetrical disorders. Section-C: Management of minor obstetric disorders practise checklist. Primigravida

mothers were the subjects of a structured knowledge questionnaire, practise checklist, and information booklet regarding the management of minor obstetric disorders.

The findings of the study have been discussed with the reference of the objectives and hypotheses and with the findings of the other study.

Conclusions

The following conclusions were drawn from the study:

- The study's findings showed that 88.3% (53) of the participants lack sufficient knowledge, while 11.7% (or 7) have moderate knowledge.
- The assessment of the relationship between knowledge and practise in the management of primigravida mothers revealed no statistically significant relationship between knowledge and practise in the treatment of minor obstetric disorders.

The study's overall findings made it abundantly clear that primigravida mothers with knowledge did not manage minor pregnancy discords in any way.

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